

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000011907

FILED
Mar 11, 2009
Secretary of State

Entity Name: A SAFE PLACE MANATEE, INC.

Current Principal Place of Business:

5512 26TH ST. W.
BRADENTON, FL 34207

New Principal Place of Business:

Current Mailing Address:

5512 26TH ST. W.
BRADENTON, FL 34207

New Mailing Address:

FEI Number: 26-2145926 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KNIGHT, ALEX M.
5512 26TH ST. W.
BRADENTON, FL 34207 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: KNIGHT, ALEX M.
Address: 5512 26TH ST. W.
City-St-Zip: BRADENTON, FL 34207

Title: DV () Delete
Name: SHEAN, SANDY
Address: 4229 66TH ST. CIR. W.
City-St-Zip: BRADENTON, FL 34209

Title: DST () Delete
Name: KNIGHT, CHERYL H.
Address: 1320 51 ST. W.
City-St-Zip: BRADENTON, FL 34209

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SANDY SHEAN

DV

03/11/2009

Electronic Signature of Signing Officer or Director

_____ Date